

# Manchester-Shortsville Central School District

## REQUEST FOR DISCLOSURE OF APPR RATINGS

### PROCEDURES FOR REQUESTING APPR COMPOSITE SCORE RATINGS

- Parent must fill out "Request for Disclosure of APPR Rating" form
- Form must be submitted to the building principal for approval
- A photo ID must be attached
- Principal will verify that the request is appropriate and approve the request within 3 days by signing and dating the form
- Principal will notify parent that the request has been approved and direct them to make an appointment with the district office to obtain the information
- Parent calls the district office to make an appointment
- At the meeting parents will be given an explanation of the APPR system and how the Composite Score was assigned.
- Parent will be asked to sign a form indicating that they received the rating and score for the teacher(s)/principal and have read a statement regarding confidentiality
- Parents will be given the Composite score and rating verbally
- The signed form will be kept on file in the District Office for the remainder of the school year in which the request was made.

### APPR RATING EXPLANATION

For those teachers and Principals subject to Education Law 3012-c, the Annual Professional Performance Review (APPR) will result in a single composite effectiveness score and final quality rating of "highly effective," "effective," "developing," or "ineffective." The composite score will be determined as follows:

20% - **Student growth** on state assessments or other comparable measures of student growth;

20% - **Locally selected measures** of student growth or achievement that are determined to be rigorous and comparable across classrooms as defined by the Commissioner; and

60% - **Other measures** of teacher/Principal effectiveness consistent with standards prescribed by the Commissioner in regulation.

### APPR RATING SCALE

The ratings scale based on composite scores has been established as follows:

- a) **Highly Effective** = composite effectiveness score of 91-100
- b) **Effective** = composite effectiveness score of 75-90
- c) **Developing** = composite effectiveness score of 65-74
- d) **Ineffective** = composite effectiveness score of 0-64

**Manchester-Shortsville Central School District**  
**REQUEST FOR DISCLOSURE OF APPR RATINGS**  
**Send to the Building Principal**

1. What is your name? \_\_\_\_\_

2. What is your phone number? \_\_\_\_\_

3. What is your address? \_\_\_\_\_

Photo ID Attached

4. What is the name of your child for whom this request is being made? (This information will help determine for which teacher(s) the parent has the right to request score(s).)

\_\_\_\_\_ Grade Level: \_\_\_\_\_

**\*Composite effectiveness score can only be released for the child's current teacher(s) and principal.**

5. For what employee(s) would you like to receive scores? The employee will be notified that you are making this request.

<u>Principal Approval</u>	<u>Denied (explanation)</u>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>

**Thank you.** Building Principal or designee will get back to you regarding your request within 3 business days.

**PRINCIPAL APPROVAL:** \_\_\_\_\_ **Date** \_\_\_\_\_

**For Action by the Principal or Designee:**

**Parent was notified** to confirm approval and notified to make an appointment with the District Office.

By telephone on: \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_:\_\_\_\_ AM/PM  
(Date) (Time)

In person on: \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_:\_\_\_\_ AM/PM  
(Date) (Time)

**Teacher was notified** that scores were requested by parent via a COPY of this form being sent to employee.

Copy of this form placed in interoffice mail on \_\_\_\_/\_\_\_\_/\_\_\_\_.  
(Date)

**SEND A COPY OF THIS REQUEST FORM TO THE DISTRICT OFFICE**  
**For Action by District Office:**

**Parent called for an appointment on:** \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_:\_\_\_\_ AM/PM  
(Date) (Time)

**Appointment with parent** is scheduled on: \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_:\_\_\_\_ AM/PM  
(Date) (Time)

**Release of APPR Rating and Composite Score**  
**CONFIDENTIAL**

Name of Parent(s)/Guardian Making Request: \_\_\_\_\_

The following information will be provided by the Superintendent of Schools or Assistant Superintendent verbally:

Subject/Grade Level or Principal	Composite Score	Quality Rating

**Parent/Guardian Statement of Understanding:**

As the parent or legal guardian of a child in the Manchester-Shortsville Central School District, I understand that I have the right to obtain information related to the Annual Professional Performance Review for a legitimate purpose. I understand I received personally identifiable information.

I understand that I should not share this information with others, including other parents/guardians, but rather encourage others to utilize the established process for accessing APPR ratings in the same manner that I have accessed this information.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**THIS REQUEST and RELEASE WILL BE RETAINED ON FILE IN THE DISTRICT OFFICE UNTIL THE END OF THE SCHOOL YEAR IN WHICH THE REQUEST WAS MADE.**